PATENT APPLICATION FEE DETERMINATION RECORD 997843													.
Effective October 1, 2000 0985 7863.													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SWALL ENTITY TYPE			OTHER THAN		
TOT	AL CLAIMS		32					RAT	E	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOT	AL CHARGEAE	LE CLAIMS	32_minus 20=		12			X\$ :	}=		OR	X\$18=	216
INDE	PENDENT CU	ums .	10 minus 3 =		7			X40	) <del>=</del>	·	ОЯ	X80=	560
		DENT CLAIM PE						+13			OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOT		1 1	9 - 1	TOTAL	1486
I was all of the diams as amended - Part II									<b>~</b> _		,	OTHER	
(Column 1) (Column 2) (Column 3									LL	ENTITY-	OR	SMALL	
₩ W		CLAIMS REMAINING AFTER AMENDMENT		NUL PREVI	HEST MBEA OUSLY FOR	PRESENT EXTRA		RAI	Æ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	· 20	Minus	-3	2	- Ø		X\$	9=	. //:	OR	X\$18=\	<u>/</u>
2	Independent	.6	Minus	•••	0	- (D)		X40	) <del>=</del>	X	OR	X80=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+13	 5=	7.7	OR	+270=	
									<b>STAL</b>			TOTAL	
N.E. 3 17/05 5.C. (Column 2) (Column 3)									FEE		g - · · ·	ADDIT. FEE	
<u>.</u>	<u> </u>	(Column 1) CLAIMS	ا شاه داد	HIG	HEST MBER MOUSLY D FOR	Ĭ	7	Ė	<u> </u>	ADDI- TIONAL FEE		7	ADDI-
	2	REMAINING AFTER AMENDMENT		PREV		PRESENT EXTRA		RATE	TE			RATE	TIONAL FEE
AMENDMENT B	Total	. 20	Minus		32)	•/		X\$	9=		OR	X\$18=	,
REE	Independent	. 6	Minus	***	10	=		X4	0=		ОЙ	X80=	
4	FIRST PRESE	NTATION OF M	IULTIPLE DEPENDEN		IT CLAIM			+13	5=		OR	_+270 <del>=</del>	
								ADDIT	OTAL FEE	- H	OR	YOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)													
		CLAIMS REMAINING			HEST MBER	PRESENT				ADDI- TIONAL FEE		DATE	ADDI- TIONAL
5		AFTER AMENDMENT	10		VIOUSLY ID FOR	EXTRA		RATE	TE			RATE	FEE
AMENDMENT C	Total	•	Minus	••		=		X\$	9≖		OR	X\$18≠	• ;
200	Independent	•	Minus	•••		=		X4	0=		ÓR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT								a	1	OR		
	.\	umn t is less than	the entry in col	 umn-2, w	rite °C' in c	otumn 3.			35= 012	<del> </del>	-{{}	TOTAL	
"If the entry in column 1 is less than the entry in column 2, write "of in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												E <b>L</b> .	
	The "Highest Nu	mber Previously P	aid For (Total	or Indepe	indent) is t	ne highest num	ber	lound in	the a	appropriate b	ox in c	ZOLETER T.	, -

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**Application or Docket Number**